TOWN OF EAST WINDSOR

Parks and Recreation Department 11 Rye Street Broad Brook, CT 06016 (860) 627-6662

Special Program/Event Registration Form

Program/Event: Lions Club Bike Rid	le
Participant's Name	Age
Address	Tele:
Email Address:	
Emergency Contact	Tele:
Special Concerns	
Payment Enclosed \$	Method: Check # Cash
activity. In case of emergency, if family ca attending Emergency Department Physicia medical insurance will be used in the event I agree to hold harmless the Town of	n to treat me. I also understand that my own tof an injury. of East Windsor, the Parks and Recreation it's officers, sponsors, agents, employees and rom any loss, blame, expenses, injuries,
Signature:	Date:
checks will be charged a \$20 fee. Please keep as your receipt: Program Name: Pa	st Windsor Parks and Recreation." Returned ayment Amount: Check # or
Cash Date:	